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				P	P.O. Box 1450 Alexandria, Virginia 22313-1450		
SEP 2 1 2004 (3) or <u>Fax</u> (703) 746-4000							
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25859 7590 06/16/2004 have its own certificate of mailing or transmission.							
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S.A. T. O. B. Mari, G. T. S. G.					(Depositor's na		
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APPLICATION NO. FILING DATE			FIRST NAMED	INVENTO	OR .	A TORNEY DOCKET NO.	CONFIRMATION NO.
10/086,617	02/28/2002		Kun-Tsan W			X	1920
TITLE OF INVENTION: OPTICAL SWITCH							
APPLN. TYPE	SMALL ENTITY	ISSUE FI	EE I	PUBLICATION FEE		TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330		\$300		\$1630	09/16/2004
EXAMINER		ART UNIT		CLASS-SUBCLASS		]	
PAK, SUNG H 2			385-018000				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  The Address form PTO/SB/122) attached.  The Address indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.  2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents on a member a registered attorney or agents and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.							I TE CHUNG
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
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4a. The following fee(s) are enclosed:  4b. Payment of Fee(s):							
Sissue Fee X☐ A check in the amount of the fee(s) is enclosed.  Signature Form PTO-2038, is attached.							
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